



VERMONT DEPARTMENT OF PUBLIC SAFETY
DIVISION OF FIRE SAFETY
 Office of the State Fire Marshal, State Fire Academy and State Haz-Mat Team
firesafety.vermont.gov



Final Construction Valuation Form

Return this completed form and payment to the appropriate Regional Office

Barre Regional Office

1311 U.S. RTE 302, Suite 500
 Barre, VT 05641
 Phone: (802) 479-4434
 Fax: (802) 479-4446

Rutland Regional Office

56 Howe Street, Building A, Ste 200
 Rutland, VT 05701
 Phone: (802) 786-5867
 Fax: (802) 786-5872

Springfield Regional Office

100 Mineral Street, Suite 307
 Springfield, VT 05156-3168
 Phone: (802) 885-8883
 Fax: (802) 885-8885

Williston Regional Office

372 Hurricane Lane, Suite 102
 Williston, VT 05495
 Phone: (802) 879-2300
 Fax: (802) 879-2312

This form must be completed for all projects and the payment of additional fees must be included prior to approval for occupancy or use.

Detail the actual project valuation including all change orders and calculate the permit fee based on that valuation.

Site Information:

Name of Building/Site: _____

Physical Location: _____

(9-1-1 Address)

Number and Street name, City/Town, Zip code

Name of Lessee: _____

(if business)

Building Owner Name: _____

Final Construction Valuation:

The Permit Fee is based on the total valuation of new construction or rehabilitation work for which the permit is being obtained. - For projects involving **volunteer labor and donated material**, the valuation of construction work is based on the value of the volunteer labor as well as the donated materials when calculating the permit fee.

The **current fee** is \$5.50 per \$1,000 (0.0055) of construction valuation for all construction and rehabilitation work.

a. Site work	\$
b. Valuation of building construction	\$
c. Fixed equipment, installed	\$
d. Electrical	\$
e. Plumbing	\$
f. Elevator and/or Lift	\$
g. Heating and Air Conditioning	\$
h. Consulting Services	\$
i. Other:	\$
j. Sprinkler system	\$
k. Other fire suppression systems	\$
l. Fire alarm system	\$
TOTAL FINAL VALUATION	\$

Additional Fee

[Line 1] Final construction valuation	=	\$	_____
[Line 2] Initial estimated construction valuation	=	\$	_____
[Line 3] Increase in construction valuation	=	\$	_____
[Line 4] Multiply Line 3 amount by current fee amount	=	\$	_____

The amount on Line 4 is the additional fee owed to the Dept. of Public Safety

I hereby attest by my signature under 13 V.S.A. 3016 (filing a FALSE CLAIM with a department or agency of the state) that the information contained within this form is correct and accurate to the best of my knowledge:

Signature of Applicant: _____ **Date:** _____

* FOR OFFICE USE ONLY *

Site#	Project #	Received Date:	Check #	Amount	Event #: